PIERCE COUNTY REPORT OF INCIDENT OR UNSAFE CONDITION (Do NOT use to report County-owned VEHICLE damage OR County EMPLOYEE INJURIES) 1 2010

Department	Your Department's Risk Management BARS Code: ROAD OPER
Ronds	-PW-Road Ops 150600.6200.54290.46.0030
Employee Completing Report Person Injured/Involved in the Accident or Incident	Employee Name Social Security Number
	Division, Section, Etc.
	Work Address Work Phone
	Work Address (2000/Nough DR NW Name Age
	WES LANTS 59
	Home Address **PO BOX 325 OLALLA WA 98359 Home Phone 253-851-3762
	Occupation WS II
	Employed By: Work Phone
	What was the involved person doing at the time of accident or incident?
	INSTALLING CULVERT PIPE
Date, Time and Place	Date 3 - 30 - 10 Time 2 (00 A.M. (P.M.) (circle one)
	Location 43 rd NW
The injury	Nature and extent of injury
	Where was injured taken after accident? Name of Doctor
	Why was injured on premises?
Property Damage or Theft of Property	Owner's Name Home Phone
	Address 43 rd 57 NW WATLY Work Phone
	PERORE WATER SERVICE LINE
	Police Case #:
Description of	(Attach additional sheets if necessary.)
	THE LOCATES WERE 4 FEET OFF
Accident, Incident or Unsafe	
Condition	
	Locates Required? (yes) no Locate #: 1005886
Describe 1st Aid:	PARKS - Did person resume skating? yes no
Witnesses	Name Address Wk Phone Hm Phone
	FENDAL WILLITS Name Address 798-4982 Wk Phone Hm Phone
	Date, location and badge # or name of police authority to whom incident was reported:
Date ?-3/-/ 0	Signature of Employee Signature of Department or Agency Head
	Wesle Jan & Mill

Return completed form to:

PIERCE COUNTY RISK MANAGEMENT 955 Tacoma Avenue South, Suite 303 Tacoma, WA 98402

LOCKTE
4' AWAY WATER Pipe